

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 09/901,592		Filing Date 11 July, 2001		<input type="checkbox"/> To be Mailed					
				Applicant(s) HOLM ET AL.						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 02/11/2009		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1					51					
2				1				52					
3				1				53					
4				1				54					
5				2				55					
6				2				56					
7				2				57					
8				1				58					
9								59					
10								60					
11								61					
12								62					
13								63					
14								64					
15								65					
16								66					
17								67					
18								68					
19			1					69					
20			1					70					
21								71					
22								72					
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25								75					
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27								77					
28								78					
29								79					
30								80					
31			1					81					
32								82					
33								83					
34			1					84					
35								85					
36								86					
37			1					87					
38			1					88					
39			1					89					
40			1					90					
41			1					91					
42			1					92					
43			5					93					
44			5					94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
Total Indep		5					Total Indep						
Total Depend			26				Total Depend						
Total Claims			31				Total Claims						

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